**Legal Self Declaration Form**

**Full Name of Declarant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Date of Declaration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

#### **1. Statement of Declaration**

**“**I, [Declarant’s Name], hereby declare the following under penalty of perjury and state that the information provided is true to the best of my knowledge.**”**

**2. Purpose of Declaration**

* **Specific Reason for Self-Declaration:**
* **Relevant Details and Background Information:**

**3. Supporting Evidence and Documents (if any)**

| **Document Type** | **Description of Document** | **Date Issued** | **Authority Issued by** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |

**4. Certification  
“**I declare that the statements made above are true and correct to the best of my knowledge.**”**

**Signature of Declarant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_  
Witness Signature (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**